PTO/SB/01 (6–95) (modified)
Approved for use through 10/31/96 OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

0010/PTO Rev. 6/95	U.S. Department of Patent and Tradem		Attorney Docke	t Number	4483 US						
			First Named Inv								
DECLAR	ATION FO	R	COMPLETE IF KNOWN								
UTILIPY PATENT A	OR DESIG		Application Nu	mber	9						
(FEB 0	2 2001 🖳		Filing Date		September 19, 2000						
ATTENTON OF THE PROPERTY OF TH	2 2001		Group Art Unit		2123						
[] Declaration Submitted with Initial Filing		laration mitted after al Filing	Examiner Name								
As a below named inventor, I he	ereby declare that:										
My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: METHOD AND APPARATUS FOR DETERMINING COLIMITS OF HEREDITARY DIAGRAMS											
the specification of which (Title of the Invention)											
is attached hereto											
OR				_		•					
[X] was filed on 09/19/2000 as	-	-			f applicable).						
Application Number 09/665,179 I hereby state that I have review					••	claims, as					
amended by any amendment spe				- 							
I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations. § 1.56.											
I hereby claim foreign priority benefits under Title 35, United States Code § 119 (a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.											
Prior Foreign Application	Country	Foreig	gn Filing Date	Prio	'	Certified Cop					
Number(s)		(MM	I/DD/YYYY)	Not Cl		YES	NO				
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Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:											
The Latin de Lange of Title 26 United States Code \$ 110(a) of an United States are visited and instinction (a) listed below											
I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below. Application Number(s) Filing Date (MM/DD/YYYY) [] Additional provisional											
60/155,271		9/19/99	<u>'</u>	application numbers are							
VV: 1.33,2 : 1	V		'	listed on a supplemental							
						ttached hereto.					
		-									

DECLA ATION									V	P	age	2			
I hereby claim the benefit under Title 35, United States Code § 120 of any United States application(s), or § 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.															
U.S. Parent App															
Number			(MM/D					(if applicable)							
Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.															
As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:															
	Name			istratio			Name						_	ration	
			- Ni	umber	-							Number			
Greg T. Sueoka Laura A. Majerus Michelle K. Lee Tina M. Lessani			33 40 41	33,800 33,417 40,695 41,150			attac	hed her	reto						
		l/or agent(s) nai	incu on a	a supp	icilicilia	ii Sileet	allac	ned nei	icio.						
Please direct all correspondence to: Laura A. Majerus Fenwick & West LLP Two Palo Alto Square Palo Alto, CA 94306 U.S.A.															
Telephone (650) 858-7152					F	ax	(650) 494	-1417					
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. Name of Sole or First Inventor: A petition has been filed for this unsigned inventor Busko															
Name Inventor's			Initial	Ь	l N	ame	_			1			e.g. Jr.		
Signature Date 15 Jan 7001									21						
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Mailing Address															
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[] Additional inventors are being named on supplemental sheet(s) attached hereto

DECLARATION						ADDITIONAL INVENTOR(S) Supplemental Sheet								
Name of Additional Joint Inventor, if any:						·								
Given Douglas			Mid Initi	1 10		Family Name					Suffix e.g. Jr.			
Invento Signatu		Date 15 Jan 01												
Residence: City Mountain View				State	CA	Country USA		USA			Citizenship		USA	
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Mailing Address Mailing Address FB 0 2 200														
City	Mountain	View R	TA PENA	State	CA	Zip	94	040	(Count	ту	USA		
Name	of Addi	tional Joint Inve	enter, A	hy:	[]	A petiti	on ha	is been f	filed for	this	unsig	ned inve	ntor	
Given Name	Junbo		Mide Initia	4		Family Name	Liu Suffix e.g. Jr.							
Invento Signatu		٦, ٦	~						Date		Jar	1-24.	201	, 1
Resider	nce: City	Santa Clara		State	CA	Country USA			_	Citizenship Chi			Chin	a
Mailing	Mailing Address 76 Arcadia													
Mailing	g Address													
City	Santa Clai	a		State	CA	Zip	950	051	(Count	ту	USA		
Name	of Addit	ional Joint Inve	entor, if a	ny:	[]	A petitio	on ha	s been f	filed for	this ı	unsig	ned inve	ntor	
Given Name			Mido Initia			Family Name							Suffix e.g. Jr.	
Invento Signatu						Date								
	ice: City			State		Count	ту				Citiz	zenship		•
Mailing	Address		•											
Mailing	Address													
City		State						Country						
Name	of Addit	ional Joint Inve	entor, if a	ny:	[]	A petitio	on ha	s been f	filed for	this ι	unsig	ned inve	ntor	
Given Middle Family Suffix Name Initial Name e.g. Jr.														
Inventor									Date			· · · · · ·		
	ce: City			State		Count	гу				Citiz	zenship		
Mailing	Address													
Mailing	Address													
City				State		Zip	·		С	ountr	гу			
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